

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

RENA ABRAN :  
Plaintiff :  
vs. :  
CITY OF PHILADELPHIA :  
et al. :  
Defendants : No. 2:18-CV-01107

Wednesday, January 8, 2020

Oral Deposition of LATASHA McMILLAN,  
taken pursuant to notice, held at the Offices  
of O'Connor Kimball, Two Penn Center, Suite  
1100, Philadelphia, Pennsylvania 19102,  
commencing at 11:35 a.m. before Michelle A.  
Landman, Professional Reporter and Notary  
Public; in and for the Commonwealth of  
Pennsylvania.

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Page 2		Page 4	
1	APPEARANCES:	1	- - -
2		2	I N D E X
3	THE LAW OFFICES OF TROY WILSON	3	- - -
4	By: TROY WILSON, ESQUIRE	4	WITNESS PAGE
5	215 Broad Street, 2nd Floor	5	LATASHA McMILLAN
6	Philadelphia, Pennsylvania 19107	6	(Witness sworn.)
7	215-985-4566	7	EXAMINATION BY:
8		8	Mr. Wilson. . . . . 05
9	Representing the Plaintiff	9	
10		10	- - -
11	THE CITY OF PHILADELPHIA, LAW DEPARTMENT	11	E X H I B I T S
12	By: MARK MAGUIRE, ESQUIRE	12	- - -
13	One Parkway Building	13	NUMBER DESCRIPTION PAGE
14	1515 Arch Street, 17th Floor	14	
15	Philadelphia, Pennsylvania 19102	15	None marked.
16	215-683-5001	16	
17	Representing the City of Philadelphia	17	
18		18	
19	THE LAW OFFICES OF O'CONNOR KIMBALL, LLC	19	
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	Representing Corizon		
	Continued...		
Page 3		Page 5	
1	APPEARANCES:	1	- - -
2		2	LATASHA McMILLAN, after having
3	THE LAW OFFICES OF MATIS, BAUM, O'CONNOR	3	been first duly sworn, was examined
4	By: JULIA F. KURTZ, ESQUIRE	4	and testified as follows:
5	912 Fort Duquesne Boulevard	5	- - -
6	Pittsburgh, Pennsylvania 15222	6	E X A M I N A T I O N
7	412-338-4713	7	- - -
8		8	BY MR. WILSON:
9	Representing MHM Correctional	9	Q. My name is Troy Wilson, I'm the
10	Services, Inc. and Dr. Olumide	10	attorney for the plaintiff in reference to
11	Oluwabusi	11	the caption matter Abran, et al. versus City
12		12	of Philadelphia, Corizon, et al.
13		13	Your last name again?
14		14	A. McMillan.
15		15	Q. Ms. McMillan, before we get started, I
16		16	don't anticipate keeping you here for an
17		17	inordinate amount of time, it's not the way
18		18	we generally work.
19		19	In order for things to run a lot more
20		20	smoothly, just a few general rules and
21		21	parameters that we have, and your attorney
22		22	may chime in as well.
23		23	Even though you're seated right next
24		24	to the stenographer, try to keep your voice

<p style="text-align: right;">Page 6</p> <p>1 up. Speak in a loud clear voice. You can't 2 answer any questions um-hum or nuh-huh 3 because she doesn't know what that means. 4 And also you can't nod affirmatively or shake 5 your head, you have to say whatever it is you 6 want to say. 7 If you need to take a break, that is 8 not a problem. Just let us know and we can 9 take a break. I don't anticipate that we are 10 going to be here for such a long time period 11 that you're going to need to, but even if you 12 need to, it is what it is, it won't be a 13 problem, just let us know and we will stop. 14 The only requirement prior to taking a 15 break, if there is an outstanding question 16 that's been posed to you, you have to answer 17 the question on the record and then you can 18 take your break. 19 Are you taking any medication today 20 that might impair your ability to understand 21 my questions or your ability to recollect? 22 A. No, sir. 23 Q. Have you done a deposition before? 24 A. Yes.</p>	<p style="text-align: right;">Page 8</p> <p>1 A. 2003. 2 Q. I'm sorry. Did you finish your 3 answer? 4 A. No. 5 Q. Okay. Go ahead. 6 A. I have also obtained two Master's 7 Degrees, both in 2007, from Wilmington 8 University. One as a Master's of Science in 9 Healthcare Administration. And the other, a 10 Master's of Science, Nursing and Executive 11 Leadership. 12 I'm currently at the University of 13 Charleston in West Virginia working on a 14 Doctorate in Executive Leadership. 15 Q. Are you working on executive 16 leadership in a particular field or is it 17 just general executive leadership? 18 A. General executive leadership. 19 Q. I forgot a couple other things to 20 mention. And I don't foresee this being a 21 major problem, but I have to put it on the 22 record. 23 As we get into the deposition, you may 24 anticipate a question that I might have or</p>
<p style="text-align: right;">Page 7</p> <p>1 Q. To the best of your recollection, I'm 2 not holding you to a specific number, how 3 many have you performed? 4 A. One. 5 Q. How long ago was that? 6 A. 2014. 7 Q. And was that in Maryland? 8 A. No, that was in Philadelphia. 9 Q. Okay. And what kind of case was that 10 for? 11 A. Trying to go back five years, it was 12 an allegation of a patient, just in relation 13 to back when we were triple celling patients 14 in the city, well before my time. However, I 15 had assumed the role of Regional Director of 16 Nursing a month before, so I caught the 17 deposition. 18 Q. I like the phraseology. 19 Okay. Could you provide me with your 20 educational background? 21 A. Sure. I am a graduate of Delaware 22 State University where I obtained my 23 Bachelor's of Science in Nursing. 24 Q. What year?</p>	<p style="text-align: right;">Page 9</p> <p>1 want to provide your answer, what you have to 2 do is, we instruct all witnesses to simply 3 wait for me to complete the question. We 4 have to do it in order for the stenographer's 5 purpose. She takes my question down and then 6 whatever your answer is, your answer is. She 7 can't take down both of us speaking at the 8 same time. So just wait for us to finish the 9 question. 10 If you don't understand something, I 11 have no problems with you either asking me, 12 telling me you don't understand, and I can 13 try to rephrase it. Okay? 14 A. Absolutely. 15 Q. All right. Other than the education 16 that you just testified to, did you have any 17 other -- do you have any certifications? 18 A. I do. I have a certification in 19 sexual assault nurse examination, I obtained 20 that back in 2012. 21 I also obtained in 2016 -- yes, 2016, 22 my nurse executive advanced board 23 certification. 24 I am also a certified correctional</p>

<p style="text-align: right;">Page 10</p> <p>1 healthcare professional, I obtained that back 2 in 2006. 3 And I'm obviously a registered nurse 4 from 2003. 5 Q. The 2006 certification, where did you 6 obtain that certification? 7 A. It's a national certification from 8 National Commission on Correctional 9 Healthcare. 10 Q. So was there training done? 11 A. There is more studying than anything 12 else. They use experience and essay writing 13 and a specific 50-question test to determine 14 whether you are a subject matter expert in 15 corrections. 16 Q. So that's something that you basically 17 study at your home base and take an online 18 test or do you have to go to a particular -- 19 A. No, I went to a National Commission on 20 Correctional Healthcare conference back in 21 2006 where I had to test along with the other 22 testees across the country. 23 Q. Any other certifications or 24 qualifications?</p>	<p style="text-align: right;">Page 12</p> <p>1 Philadelphia Department of Prisons, here in 2 Philadelphia. 3 Q. Were you living in Philadelphia? 4 A. No, sir. I live in Maryland. 5 Q. In the time period you're talking 6 about with the Philadelphia Prison System, 7 you were commuting? 8 A. From Maryland to Philly. And still 9 am, yes. 10 Q. Okay. What did that entail? 11 A. The commute? 12 Q. No. No. The job. What's the job 13 description? 14 A. Oh, I initially started ten years ago 15 as an assistant health service administrator. 16 That was more the assistant to the overall 17 health authority, where we had to oversee all 18 the facility operations within the facility. 19 I was then promoted in 2012, maybe, to 20 the Regional Director of Nursing. I held 21 that position until 2014, where I was 22 promoted to the Director of Operations. And 23 that is the position I currently hold. 24 Q. Do you have a resume?</p>
<p style="text-align: right;">Page 11</p> <p>1 A. I am also a trauma nurse, corp course 2 nurse. I obtained that initially back in 3 2008. I am advanced cardiac life support 4 nurse as well. I'm trying to remember them 5 all. 6 Q. There is just so many? 7 A. I'm going to leave it at that, if I 8 may. 9 Q. It's fine. What I've learned, it's 10 not bragging if it's true. 11 A. It's true. 12 Q. In the course of your education and 13 experience, have you had any experience with 14 or certifications for, for example, dealing 15 with suicide deaths, treatment for suicide 16 deaths? 17 A. Certification, no. 18 Q. If you know, you're here as a 19 corporate designee of Corizon. Your 20 employment history, we did your education. 21 What's your employment history like, 22 say for like the last seven years? 23 A. The last seven years -- actually, the 24 last ten years I have been with the</p>	<p style="text-align: right;">Page 13</p> <p>1 A. I do. 2 Q. Can you make sure your counsel gets 3 the resume? She can give it to me. 4 A. Absolutely. 5 Q. The positions that you just testified 6 to, were those in relation to Corizon or was 7 that a separate position? 8 A. All Corizon. 9 Q. Okay. So how long have you been 10 working for Corizon? For the last ten years? 11 A. Since 2006. 12 Q. Okay. Actually last 13, going on 14 13 years. 14 Where did you work at before you 15 worked at Corizon? 16 A. So 2004 I worked at Bay Health Medical 17 Center, they call it Kent General Hospital, 18 in Dover, Delaware. 19 Q. What were your duties there? 20 A. I was a clinical coordinator. I was 21 basically a house supervisor on the 22 nightshift. I was responsible for the house 23 facilities and all operations and staffing, 24 bedding. Just support services for the</p>

<p style="text-align: right;">Page 14</p> <p>1 nurses.</p> <p>2 Q. Okay. In reference to your coming</p> <p>3 here today, did you do any preparation work</p> <p>4 to prepare you for the deposition? I'm not</p> <p>5 talking about any conversations with your</p> <p>6 attorney, but any paperwork preparation.</p> <p>7 A. No, sir.</p> <p>8 Q. Okay. Can you provide testimony, say,</p> <p>9 for example, back in 2016, in Philadelphia,</p> <p>10 as to how many suicide prison deaths Corizon</p> <p>11 was involved with in any sort of way, in</p> <p>12 reference to the Philadelphia Prison System?</p> <p>13 A. I will not be able to give you a</p> <p>14 specific number, but I can tell you that any</p> <p>15 attempted or completed suicide, Corizon and</p> <p>16 the now Centurion team, we meet every 30 days</p> <p>17 to discuss.</p> <p>18 Q. When did that process of meeting to</p> <p>19 discuss the prison suicide deaths, what year</p> <p>20 did that start; if you know?</p> <p>21 A. It was there well before I came to the</p> <p>22 Philadelphia contract. It's actually a</p> <p>23 National Commission on Correctional</p> <p>24 Healthcare standard that we have a 30-day</p>	<p style="text-align: right;">Page 16</p> <p>1 A. Lynda Witkowski.</p> <p>2 Q. And once items discussed in the</p> <p>3 meeting are reduced to writing by Lynda</p> <p>4 Witkowski, what happens to that paperwork; if</p> <p>5 you know?</p> <p>6 A. Yes. They are then filed and they are</p> <p>7 shared with their third-party consultant when</p> <p>8 he comes around. And when the National</p> <p>9 Commission on Correctional Healthcare, when</p> <p>10 they come through to determine that we are</p> <p>11 meeting the standards for access care and</p> <p>12 quality improvement, they will review them</p> <p>13 every three years.</p> <p>14 Q. Every three years, okay.</p> <p>15 So is there a database where all of</p> <p>16 these -- all of this paperwork that's</p> <p>17 generated by Lynda Witkowski are kept?</p> <p>18 A. Not electric. It's a filing system.</p> <p>19 Q. So if I want to get the physical files</p> <p>20 for these meetings, where would they be</p> <p>21 located since they are not kept</p> <p>22 electronically?</p> <p>23 A. We do keep them at the regional office</p> <p>24 for Corizon in Philly. However, we would</p>
<p style="text-align: right;">Page 15</p> <p>1 mortality review after every attempt or</p> <p>2 sentinel event is what we call it.</p> <p>3 Q. Okay. And what happens in that</p> <p>4 meeting?</p> <p>5 A. At that point in time, all the parties</p> <p>6 involved, the security team, the medical</p> <p>7 team, the mental health team, the physician</p> <p>8 who was the attending at the time, as well as</p> <p>9 the administrators of the facility, we have a</p> <p>10 round table and discuss any areas of</p> <p>11 improvement, any opportunities, any</p> <p>12 positives. Just scenarios around the event.</p> <p>13 And we attempt to find things that we can do</p> <p>14 differently, if at all.</p> <p>15 Q. Are the statements made in that</p> <p>16 particular meeting, are they reduced to</p> <p>17 writing?</p> <p>18 A. Yes.</p> <p>19 Q. And who reduces them to writing; if</p> <p>20 you know?</p> <p>21 A. The quality improvement coordinator</p> <p>22 for the medical team.</p> <p>23 Q. And in 2016, if you know, who would</p> <p>24 that have been?</p>	<p style="text-align: right;">Page 17</p> <p>1 have to get approval to share them.</p> <p>2 Q. Where is the regional office located?</p> <p>3 A. 8001 State Road.</p> <p>4 Q. Okay. And so essentially that's where</p> <p>5 the paperwork would be for all the -- for the</p> <p>6 last -- how many years, if you know, has that</p> <p>7 paperwork been kept?</p> <p>8 A. We keep it for every sentinel event</p> <p>9 that we have since the beginning of time</p> <p>10 almost.</p> <p>11 Q. Do you have an independent</p> <p>12 recollection as to the suicide death event of</p> <p>13 an inmate named Gene Wilson in 2016?</p> <p>14 A. I was the -- 2016, I was the Director</p> <p>15 of Operations at that point. Outside of this</p> <p>16 incident where I got to talk to Ms. Cauley, I</p> <p>17 can't say that I remember. But I know that I</p> <p>18 am a part of the sentinel death committee, so</p> <p>19 I'm sure I was part of that meeting.</p> <p>20 Q. Right. I'm just trying to get on the</p> <p>21 record if you have an independent</p> <p>22 recollection or not.</p> <p>23 A. Nothing stands out, no, sir.</p> <p>24 Q. What are the general standards you</p>

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<p>1 mentioned about the committee, the 2 commission? What are the general standards 3 as it relates to Corizon and care for 4 prisoners who may have either attempted 5 suicide or successfully attempted suicide? 6 A. From the Corizon side, our overall 7 responsibility is to insure that we get the 8 record closed so that we can share it with 9 the Centurion team, and the security team. 10 Obviously the warden is who we are looking to 11 give that information to. 12 At that point in time, we are also 13 responsible for setting up the sentinel event 14 meeting, the mortality meeting that we do 15 every 30 days post the sentinel event. 16 Outside of that, we do look to our 17 Centurion team to let us know if there were 18 things that we can assist with, considering 19 it is a behavioral health concern. 20 Q. Are there any rules and regulations 21 concerning the standards that Corizon has to 22 meet, that Corizon has developed in reference 23 to suicide? How to deal with a prisoner who 24 has either attempted to commit suicide or who</p>	<p>1 your attorney instructs you not to answer. 2 If there is an objection of some sort, then 3 you should stop and let the attorneys 4 hopefully resolve their issues and then you 5 can go on. So I apologize not mentioning 6 that earlier. 7 A. Thank you. 8 Q. As far as the annual correctional 9 training that you talked about in this 10 particular area; how is that done? 11 A. So it's not correctional training. 12 It's just suicide prevention training. 13 Q. And I apologize. 14 A. It's not specific to corrections. 15 Q. The suicide prevention training, how 16 is that implemented? 17 A. So we have several ways of doing the 18 suicide prevention training. Currently it's 19 being done on an electronic -- what we call 20 the Torch system for the Corizon staff. 21 Q. Is Torch an acronym? 22 A. No. 23 Q. Okay. 24 A. Not to my knowledge, it doesn't stand</p>
Page 19	Page 21
<p>1 has successfully committed suicide? 2 MS. CAULEY: Note my objection 3 to the form. You can answer if you 4 know. 5 THE WITNESS: I wouldn't make 6 it specific to a prisoner. Suicide 7 is a general concern, so we do 8 address it just like the community 9 would. 10 We do, from the Corizon side, 11 we do do annual suicide prevention 12 training. We also do an initial 13 mental health assessment screening 14 on every patient that walks into 15 the facility. And we are required 16 to insure that that continuing 17 education is done with every 18 person, not just nursing, but all 19 persons working inside the walls, 20 from the Corizon standpoint. 21 BY MR. WILSON: 22 Q. Before we go on, the other thing I 23 forgot to mention, I apologize, is you have 24 to answer every questions put to you unless</p>	<p>1 for anything. It's the Corizon Torch. It's 2 a learning management system for all Corizon 3 staff where we're able to get on to a system 4 where we can basically review a form of Power 5 Point, also video monitoring. And there is 6 some interaction with the, I guess the 7 program, that allows us to answer questions 8 inside of the suicide prevention module and 9 then there is a test taking component. 10 Outside of that, we also do have a 11 face-to-face mandatory in-service that's done 12 either by myself or the regional health 13 educator across the region for all the staff 14 who may not have been able to get on to the 15 electronic system. 16 Q. Is there deadline for Corizon staff to 17 be given this suicide prevention training on 18 a yearly basis? 19 A. Yes, usually the last day of the year. 20 However, we do put -- we do have a calendar 21 that we utilize every year that determines 22 when we have the training. 23 So, for instance, and I can't 24 recollect back in 2016 the date that it was</p>

Page 22	Page 24
<p>1 expected to be completed, but normally it's</p> <p>2 the month of November where all staff are</p> <p>3 expected to be trained on suicide prevention.</p> <p>4 Q. How do you confirm that? That all</p> <p>5 staff have been trained?</p> <p>6 A. If it was done, the face-to-face</p> <p>7 in-service that I spoke of earlier, we do</p> <p>8 have signature sheets noting the fact with</p> <p>9 the information that was taught, as well as</p> <p>10 the people who were in attendance.</p> <p>11 In addition to that, if it was done on</p> <p>12 the electronic system, there is a certificate</p> <p>13 that's completed and forwarded so that we can</p> <p>14 run a report to determine who has and who has</p> <p>15 yet to complete.</p> <p>16 Q. Where are the certificates kept?</p> <p>17 A. The certificates are kept on person.</p> <p>18 And copies of them are given to us for the</p> <p>19 training files.</p> <p>20 Q. Okay. So when copies of that are</p> <p>21 given to you, where are those kept?</p> <p>22 A. They are kept in the employee specific</p> <p>23 training file at the facility in which they</p> <p>24 work.</p>	<p>1 meetings at each of our facilities to offer</p> <p>2 any suggestions or guidance.</p> <p>3 Q. So when a prisoner is housed at a</p> <p>4 prison up on State Road, there is a Centurion</p> <p>5 employee who would be conducting some form of</p> <p>6 suicide screening?</p> <p>7 A. Not at the time, no. The physical</p> <p>8 health provider RN in the intake area, the</p> <p>9 Corizon nurses are responsible for the</p> <p>10 initial health screening.</p> <p>11 Q. And so maybe I didn't understand. Is</p> <p>12 there anything physically written down about,</p> <p>13 these are the areas that have to be hit for</p> <p>14 screening for Centurion employees who are</p> <p>15 going to do this particular thing?</p> <p>16 A. I'm not familiar with what the</p> <p>17 Centurion employees have to do. Because all</p> <p>18 patients who come through the system, they</p> <p>19 meet with the Corizon medical assistant and</p> <p>20 RN first. We are responsible for answering</p> <p>21 the questions that have been identified from</p> <p>22 the Centurion team on what we call our</p> <p>23 confidential medical screening. So it's</p> <p>24 basically a compilation of physical health</p>
Page 23	Page 25
<p>1 Q. Okay. The specific employee's file?</p> <p>2 A. Yes.</p> <p>3 Q. You mentioned something a few minutes</p> <p>4 earlier about suicide screening. Has Corizon</p> <p>5 developed any, like, written rules and</p> <p>6 regulations concerning suicide screening that</p> <p>7 they give to their employees who are dealing</p> <p>8 with prisoners in prison?</p> <p>9 A. So normally the Centurion team, they</p> <p>10 will determine what is necessary in order to</p> <p>11 do a mental health screening, that's not our</p> <p>12 forte. We are a physical health provider.</p> <p>13 They do in-service us for the</p> <p>14 expectations on the screening. They also</p> <p>15 determine the appropriate questions and</p> <p>16 assessment that needs to be completed and</p> <p>17 what their criteria is for referral. So we</p> <p>18 follow those protocols based off our</p> <p>19 Centurion team.</p> <p>20 They come over every -- at least</p> <p>21 yearly to give us the update and the</p> <p>22 refresher on the screening, the expectations.</p> <p>23 And in between that, if there are concerns,</p> <p>24 they are invited to our monthly staff</p>	<p>1 questions, mental health questions, substance</p> <p>2 abuse questions, pre-related questions and</p> <p>3 safety questions that then allow us to make</p> <p>4 appropriate referrals and plans of care going</p> <p>5 forward for their stay.</p> <p>6 So we take the responsibility as</p> <p>7 Corizon RNs to ask the appropriate questions.</p> <p>8 And based off the responses, referrals are</p> <p>9 automatically generated in our electronic</p> <p>10 health record.</p> <p>11 Q. If there is a potential referral that</p> <p>12 Corizon will make for someone who may have</p> <p>13 expressed suicidal ideation, what happens in</p> <p>14 that particular situation?</p> <p>15 A. In a situation like that, it would be</p> <p>16 considered an emergency referral and there</p> <p>17 would be an electronic alert that's sent over</p> <p>18 to the Centurion employee, whether that be</p> <p>19 someone who is on call or on site, I'm not</p> <p>20 exactly sure. And they are responsible for</p> <p>21 addressing the patient within four hours.</p> <p>22 Q. As far as addressing the patient, what</p> <p>23 does that entail based on your experience?</p> <p>24 A. I would have to defer to Centurion.</p>

<p style="text-align: right;">Page 26</p> <p>1 Q. Okay. Do you have any information on  2 the amount of prison deaths generally in the  3 Philadelphia -- does Corizon keep that  4 information, for example, in 2016 the amount,  5 the total amount of prisoner deaths in the  6 prison system, in the Philadelphia system?  7 A. Yes.  8 MS. CAULEY: Regardless of  9 suicide?  10 MR. WILSON: Yes.  11 THE WITNESS: Yes we would.  12 BY MR. WILSON:  13 Q. Would you have an independent  14 recollection as to what that number is?  15 A. No, sir.  16 Q. Does Corizon also keep the figures for  17 the amount of suicide deaths on a  18 year-to-year basis?  19 A. Yes.  20 Q. Okay. Where would that information be  21 located?  22 A. With our quality improvement  23 coordinator.  24 MR. WILSON: I don't remember</p>	<p style="text-align: right;">Page 28</p> <p>1 MS. CAULEY: Note my objection  2 to the form.  3 MS. KURTZ: I'm going to join  4 in that objection.  5 MS. CAULEY: Do you understand  6 the question?  7 THE WITNESS: I don't.  8 MS. CAULEY: Do you want to  9 repeat it or rephrase it? Your  10 choice.  11 BY MR. WILSON:  12 Q. Does Corizon have any specific rules  13 and regulations that they provide to their  14 own medical prison staff as to, hey, this is  15 what you're supposed to do when you're  16 dealing with a prisoner who has attempted to  17 commit suicide? Do you understand the  18 question, first of all?  19 A. If I can re-verbalize it to you?  20 Q. Sure.  21 A. The way that I'm interpreting what  22 you're asking me is, do we have a process to  23 manage any attempted suicides or completed  24 suicides?</p>
<p style="text-align: right;">Page 27</p> <p>1 seeing that.  2 MS. CAULEY: That's Lynda.  3 THE WITNESS: Correct.  4 MR. WILSON: Witkowski?  5 THE WITNESS: Yes.  6 MR. WILSON: I'm going to need  7 that.  8 MS. CAULEY: I'll just ask  9 that any requests be put in writing  10 afterward. Thank you.  11 We're a bit late in the game  12 for discovery.  13 MR. WILSON: Yeah, but I'm  14 just finding out certain things, I  15 agree. Because we were talking  16 about -- off the record we'll talk  17 later. I want to move on.  18 MS. CAULEY: Sure.  19 BY MR. WILSON:  20 Q. Based on your experience, what  21 specific rules and regulations are Corizon  22 medical prison staff supposed to rely on or  23 follow when prison staff are dealing with a  24 potential suicide case?</p>	<p style="text-align: right;">Page 29</p> <p>1 Q. Yes.  2 A. Yes. So the answer to that question  3 is yes, we do have a sentinel event process.  4 Q. Has that process been reduced to  5 writing?  6 A. Yes.  7 Q. And where would those writings be  8 located?  9 A. Initially they are found on our My  10 Corizon company web page where you can print  11 out any policy or procedure.  12 We do also have those items tangible  13 in our triage spaces in our sentinel event  14 manuals and processes -- binders I should  15 say, not processes.  16 Q. Those rules and regulations, how does  17 Corizon give that information to their prison  18 employees here in Philadelphia?  19 A. So many different ways. We do keep it  20 on the electronic system, that's the Torch  21 system. So you do have the ability to  22 refresh yourself on any specific item, not  23 just necessarily suicide.  24 But we also share that information at</p>



<p style="text-align: right;">Page 30</p> <p>1 our staff meetings. And we also keep the</p> <p>2 policies, procedures in what we call our core</p> <p>3 process, standards of practice. We do keep</p> <p>4 them in manuals in any space where patient</p> <p>5 encounters are completed for reference.</p> <p>6 Q. Okay. The rules and regulations that</p> <p>7 you just testified to, is the training for</p> <p>8 those rules, specific rules and regulations,</p> <p>9 is that a mandatory training for Corizon</p> <p>10 prison medical employees?</p> <p>11 A. For Corizon employees overall, yes.</p> <p>12 Q. How is that implemented then, if it's</p> <p>13 mandatory?</p> <p>14 A. The same way that I told you about the</p> <p>15 monthly -- or, I'm sorry, the yearly training</p> <p>16 that we do on suicide prevention, we manage</p> <p>17 the same way. We do initial training upon</p> <p>18 hire. Then we also do it annually</p> <p>19 thereafter.</p> <p>20 Q. So once a year thereafter --</p> <p>21 A. At minimum.</p> <p>22 Q. -- on a computer like you talked about</p> <p>23 before?</p> <p>24 A. There is two different avenues, yes.</p>	<p style="text-align: right;">Page 32</p> <p>1 case?</p> <p>2 A. I have no idea.</p> <p>3 Q. Are your qualifications as a corporate</p> <p>4 designee not only specific to Philadelphia or</p> <p>5 do you have the ability to discuss -- because</p> <p>6 Corizon is a nationwide company, right?</p> <p>7 A. Yes.</p> <p>8 Q. Or Centurion; is that correct?</p> <p>9 A. Corizon is, correct.</p> <p>10 Q. Do you have familiarity with issues</p> <p>11 presented to some of these -- I'm just doing</p> <p>12 it as a very general question right now and</p> <p>13 I'll go into specifics later.</p> <p>14 Do you have the ability to discuss and</p> <p>15 testify about Corizon issues regarding, say,</p> <p>16 for example, suicide training for other</p> <p>17 states, or are you just specific to</p> <p>18 Pennsylvania?</p> <p>19 A. Specific to Pennsylvania. And</p> <p>20 actually specific to Philadelphia.</p> <p>21 Q. Okay. On or about March of 2016, if</p> <p>22 you know, in Philadelphia, did Corizon</p> <p>23 require its nursing personnel to obtain CPR</p> <p>24 training?</p>
<p style="text-align: right;">Page 31</p> <p>1 It can be done electronically via the system</p> <p>2 or it could be done as a face-to-face</p> <p>3 in-service.</p> <p>4 Q. Okay. If you know, you mentioned that</p> <p>5 you were here in Philadelphia for one lawsuit</p> <p>6 for a deposition about five years ago. Do</p> <p>7 you remember the name of that caption, the</p> <p>8 case?</p> <p>9 A. No, sir.</p> <p>10 Q. Okay. In the last seven years, if you</p> <p>11 know, how many lawsuits has Corizon had in</p> <p>12 Pennsylvania where they were named as a</p> <p>13 defendant in a prison suicide case?</p> <p>14 A. I don't know.</p> <p>15 Q. In the last seven years, how many</p> <p>16 lawsuits has Corizon had -- I'm going to</p> <p>17 rephrase that.</p> <p>18 The same question for -- is your</p> <p>19 answer the same for federal and state?</p> <p>20 A. Yes, sir. I have no clue.</p> <p>21 Q. Okay. All right. In the last seven</p> <p>22 years, how many lawsuits has Corizon had in</p> <p>23 the United States, if you know, where they</p> <p>24 were named as a defendant in a prison suicide</p>	<p style="text-align: right;">Page 33</p> <p>1 A. Yes.</p> <p>2 Q. Okay. And how was that done? How was</p> <p>3 that implemented?</p> <p>4 A. Well, CPR training is a responsibility</p> <p>5 of the licensed personnel. So they are</p> <p>6 required, each person who holds a license, is</p> <p>7 required to meet the standards for what we</p> <p>8 have, at least in Philadelphia, through the</p> <p>9 American Heart Association or the American</p> <p>10 Red Cross, to obtain their healthcare</p> <p>11 professional CPR certification independently.</p> <p>12 Q. So there is no way to gauge whether or</p> <p>13 not a Corizon employee has indeed obtained</p> <p>14 certification for CPR training? Do you</p> <p>15 understand the question?</p> <p>16 A. I do.</p> <p>17 MS. CAULEY: Objection to</p> <p>18 form. I don't think that's what</p> <p>19 she said.</p> <p>20 MR. WILSON: Well, I'm going</p> <p>21 to try to get clarification.</p> <p>22 BY MR. WILSON:</p> <p>23 Q. You said it's independent, which means</p> <p>24 it's on the person, the Corizon employee to</p>

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<p>1 obtain the CPR training?</p> <p>2 A. Correct.</p> <p>3 Q. How do you monitor that?</p> <p>4 Excuse me, when I say you, I mean not</p> <p>5 you, I mean Corizon. How does Corizon</p> <p>6 monitor that?</p> <p>7 A. So once the employee obtains their</p> <p>8 certification, what they are expected to do</p> <p>9 is provide us copies of those items where we</p> <p>10 are then able to place into what we call our</p> <p>11 people site system. And then we run a</p> <p>12 tracking system or tickler system to insure</p> <p>13 that, by the expiration date, they have given</p> <p>14 us an updated certification.</p> <p>15 Q. And what if you find out that the</p> <p>16 person, the employee has not provided that</p> <p>17 information?</p> <p>18 A. Then they are suspended.</p> <p>19 Q. So there is a way to track that. Is</p> <p>20 that information, that certification is then</p> <p>21 -- is a copy of that certification placed in</p> <p>22 the employee file?</p> <p>23 A. Yes.</p> <p>24 Q. Do you know a nurse Marilou Orgasan?</p>	<p>1 A. Yes.</p> <p>2 Q. And where is that writing located?</p> <p>3 A. Normally in our education binder with</p> <p>4 our health educator.</p> <p>5 Q. So it's a general educational binder?</p> <p>6 A. Yes.</p> <p>7 Q. And it has that information in it</p> <p>8 about how to deal with unconscious prison</p> <p>9 patients. Does it have other information?</p> <p>10 Any other information in that particular</p> <p>11 binder?</p> <p>12 A. Anything that the regional health</p> <p>13 educator would have had in-service on, yes,</p> <p>14 you will see copies of the materials that</p> <p>15 were trained on, in addition to the signature</p> <p>16 sheets of those who were in attendance.</p> <p>17 Q. And how do -- if any way -- how does</p> <p>18 Corizon assure that its prison medical</p> <p>19 employees and staff will receive this</p> <p>20 training, specifically, for example, on how</p> <p>21 to treat an unconscious prisoner?</p> <p>22 A. So emergency response training is</p> <p>23 mandatory in our contract, so whenever we try</p> <p>24 to --</p>
Page 35	Page 37
<p>1 A. Yes, I do.</p> <p>2 Q. Do you have an independent</p> <p>3 recollection as to whether or not in 2016 she</p> <p>4 had provided the requisite certification for</p> <p>5 her own CPR training on or about March of</p> <p>6 2016?</p> <p>7 A. If she was on duty, I would say yes.</p> <p>8 Q. Do you have an independent</p> <p>9 recollection?</p> <p>10 A. No, sir.</p> <p>11 Q. Okay.</p> <p>12 MS. CAULEY: I think that's</p> <p>13 been provided in discovery, just</p> <p>14 for the record.</p> <p>15 BY MR. WILSON:</p> <p>16 Q. Did Corizon provide training on or</p> <p>17 about March 2016 in Philadelphia for its</p> <p>18 prison medical staff related to how to treat</p> <p>19 an unconscious prisoner?</p> <p>20 A. We do have -- we do, every year,</p> <p>21 conduct an in-service on emergency response,</p> <p>22 yes. And unresponsive patient is a part of</p> <p>23 that scenario.</p> <p>24 Q. And has that been reduced to writing?</p>	<p>1 Q. Contract with whom?</p> <p>2 A. In our contract, the Philadelphia</p> <p>3 contract.</p> <p>4 Q. Okay.</p> <p>5 A. And what we attempt to do is be very</p> <p>6 consistent. So every year we do put out a</p> <p>7 calendar on when we are training to certain</p> <p>8 things by every month, so that allows us to</p> <p>9 insure that all of our staff are receiving</p> <p>10 the required training at one given time</p> <p>11 versus trying to meddle through it throughout</p> <p>12 the year. So we do insure those things are</p> <p>13 done.</p> <p>14 Q. Is it once a year -- like is everyone</p> <p>15 being given this training on one particular</p> <p>16 day a year?</p> <p>17 A. No.</p> <p>18 Q. Okay. I'm just trying to get my head</p> <p>19 around it. Explain to me how the training</p> <p>20 works for that particular issue then.</p> <p>21 A. So what we do is if -- say for this</p> <p>22 year, our emergency response training will be</p> <p>23 held in April. So what we will do is we will</p> <p>24 alert the staff via our education calendar</p>

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<p>1 that the upcoming month in-service and 2 training will be emergency response CPR and 3 Narcan administration. So with that being 4 said, all of the staff are expected 5 throughout the month of April to attend the 6 in-services because the educator or the 7 quality improvement coordinator will be 8 around through the facilities to conduct 9 those in-services and they are expected to 10 attend. If they do not attend, the clinical 11 administrator of the facility will then 12 conduct the in-service on their next 13 scheduled day. 14 Q. What ways does Corizon have to check 15 whether or not someone has attended? 16 A. In-service sheets. 17 Q. And where are those located? 18 A. Those are located in either the 19 administrator's in-service binder, the 20 education binder that the health educator 21 carries as the original, or in our share 22 point system. That's just our electronic 23 system that allows us to archive all of our 24 forms.</p>	<p>1 being missed. The expectation would be via 2 Email, or at this point and stage in life via 3 text, letting them know that they need to, at 4 their next scheduled day, they will be 5 meeting to have the in-service before you can 6 start your shift. I have to defer to the 7 administrator for that. 8 Q. On or about March 2016, did Corizon 9 have in place any rules and regulations 10 concerning age requirements of its nursing 11 staff in reference to treating prison inmates 12 in general? 13 A. Not to my recollection. 14 Q. Is there a mandatory retirement age 15 for Corizon employees who work at the prison? 16 A. Not to my knowledge. 17 Q. And again, same question, were these 18 rules and regulations relating to -- strike 19 that. 20 Based on Corizon contract with the 21 Philadelphia Prison System, are Corizon 22 employees who work in the prison system 23 required to abide by Philadelphia Prison 24 rules and regulations concerning the</p>
Page 39	Page 41
<p>1 Q. What, if any, punishment is given to a 2 Corizon employee who fails to attend these 3 training sessions? 4 A. The idea is not to be punitive, we do 5 encourage our staff. What we end up doing is 6 if the deadline is missed, because it is 7 something that's mandatory, but it's 8 something that can be made up on the next 9 scheduled day, what we do have our staff do 10 is meet with the clinical administrators so 11 the in-service can be conducted so they can 12 work. 13 Q. Is the fact that the person generally 14 may have missed the initial mandatory 15 training session noted in that person's, for 16 example, personnel file? 17 A. No, sir. 18 Q. Okay. Is the fact that that person 19 missed that mandatory training session noted, 20 in any way, as it relates to that particular 21 employee? 22 A. From my level, I wouldn't be able to 23 speak 100 percent on that only because there 24 is many ways of communicating a deadline</p>	<p>1 performing of medical care on prison inmates? 2 MS. CAULEY: Objection to 3 form. 4 BY MR. WILSON: 5 Q. Do you understand the question? 6 A. Yes. 7 Q. Okay. 8 A. Corizon staff are expected to adhere 9 to all policies and procedures as it relates 10 to the Philadelphia Department of Prisons and 11 Corizon. 12 Q. Are Corizon staff given training 13 sessions on the Philadelphia Prison System's 14 own independent rules and regulations 15 regarding caring for prisoners? 16 A. Yes, each month. 17 Q. Who provides the training for that 18 each month? 19 A. The Policy and Procedure Audit Deputy 20 Warden. 21 Q. And how is that provided? 22 A. Normally via a printed copy of the 23 independent policy itself. And in order to 24 determine whether the staff member has</p>

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<p>1 awareness of the policy, an original 2 signature is expected. 3 Q. Is that training mandatory? 4 A. Yes. Policy and procedures are 5 mandatory. 6 Q. And the same question as before, if a 7 Corizon employee misses that training, are 8 there corrective measures taken to insure 9 that compliance by that Corizon employee? 10 A. As long as the staff member is not out 11 on some form of leave, whether that be 12 workmen's comp or whether that be FMLA, then 13 yes. They are not allowed to work until they 14 are aware of the policy. 15 Q. As of, say, March of 2016, did Corizon 16 have any policy concerning -- for nurses, 17 concerning physical requirements for nurses? 18 A. No, sir. 19 Q. Okay. Let me try to be a little more 20 specific. Like some of the inmates are going 21 to be big people. So there may be a physical 22 aspect of trying to lift, pull somebody's 23 body over, something like that. 24 Does Corizon have, say, well you have</p>	<p>1 Q. Have they been reduced to writing? 2 A. Yes. 3 Q. Where would those writings be located? 4 A. In any one of our triage manuals for 5 emergency response. 6 Q. Who has access to the triage manuals? 7 A. Everyone in the facility. 8 Q. Is there a specific training done with 9 Corizon employees on stretcher calls? 10 A. Emergency response, yes. It's 11 inclusive of stretcher calls. 12 Q. For that particular issue, is that an 13 independent training? Is that done on an 14 independent specific training day, or is that 15 particular training done on a date when 16 Corizon employees are being trained on other 17 issues? 18 A. So the emergency response is very 19 fluid. Outside of what I testified to 20 earlier, what we also do is what we call man 21 down drills. So the Corizon team, as well as 22 the security team, at any given time across 23 the region at each facility, we are expected 24 by NCCAC standards to conduct man down</p>
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<p>1 to be -- I'm just asking if there is a 2 general physical -- because of that issue, 3 has Corizon developed a policy as far as 4 that's concerned, as it relates to, for 5 example, nurses? 6 A. Well, for all staff in general, we do 7 have staff safety requirements. For a 8 situation in which you just described, then I 9 would need basically what we call a team 10 support. So it would be me, myself and 11 others. 12 I would also elicit the support of 13 anyone around me to assist me with getting it 14 done, if that's what's necessary. We don't 15 have specific requirements that tell nurses 16 that they can't lift above 25 or 50 pounds. 17 We call it team support. 18 Q. Does Corizon have any written rules 19 and regulations as it relates to prison 20 stretcher calls? 21 A. I'm not sure if it's called prison 22 stretcher calls, but yes, in relation to 23 emergency response stretcher calls, yes, we 24 have protocol.</p>	<p>1 drills, which is basically a stretcher call, 2 where we test our skills at least monthly on 3 every shift. 4 Q. What does testing the skills entail? 5 A. It could entail many things. So just 6 to give you an example, one could be, for 7 instance, you walked up and you found a 8 patient unresponsive on the floor. What 9 would you do? 10 So we actually walk through the entire 11 scenario until a code green, what we call it, 12 or until the situation is deemed clear. And 13 then those items are actually documented and 14 then submitted for review and critique. 15 Q. And that training is given how many 16 times a year; if you know? 17 A. Twelve at minimum. It's 12 on Corizon 18 side and 12 on the security side. 19 Q. So essentially once a month, 20 basically? 21 A. Correct. On every shift. 22 Q. Say for the last five years, at 23 minimum, has Corizon here for the 24 Philadelphia Prison System, have they</p>

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<p>1 developed any written disciplinary procedures 2 that they promulgate to their staff employees 3 regarding care and treatment of prisoners? 4 A. I'm not sure if I understand. 5 Q. Okay. Let me try to rephrase it. 6 Does Corizon have anything in writing 7 that they give to their staff medical 8 employees and say if we determine that you've 9 provided inadequate care to a particular 10 prisoner, this is how you may be disciplined, 11 and then laying out whatever the discipline 12 may be? 13 A. If I could ask for clarity. Is that 14 specific to a sentinel event, an emergency 15 response or just everyday operation? 16 Q. Let's start with a sentinel event. 17 A. So for a sentinel event, the idea is 18 not to be punitive, because in an emergency 19 it is just that. So what we do, as part of 20 that mortality meeting I spoke of earlier, we 21 do invite the persons who were involved and 22 that could be the nurses at some point, the 23 physicians, the ME, whoever it may be. 24 We do sit around and have</p>	<p>1 most all of our nurses that are full time or 2 part time fall under the 1199 C collective 3 bargaining agreement. So we have a 4 progressive discipline process where you 5 start with a verbal communication, then to a 6 first written, a second written, to a final 7 warning and then to termination. 8 Q. And correct me if I'm wrong, are those 9 processes, have they been reduced to writing? 10 A. Correct. 11 Q. And these processes that you talk 12 about, they have been collectively bargained 13 with 1199 C or are these processes that 14 Corizon has developed? 15 A. No, sir. These are 1199 C negotiated 16 progressive discipline processes. 17 Q. Right. So Corizon has no specific 18 disciplinary written rules and regulations? 19 A. Yes, sir, we do. 20 Q. And what would those entail? 21 A. So outside of the Philadelphia 22 Department of Prison collective bargaining 23 agreement, Corizon does have our own standard 24 progressive discipline processes. However,</p>
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<p>1 conversation. If it was true negligence, 2 yes, absolutely, we will have conversation. 3 We have done that in the past. 4 However, most times it is conversation 5 about what we can do to educate them or what 6 we may have done process wise that may have 7 been flawed. So the goal is not to scare our 8 nurses, the goal is to empower them to do 9 better. 10 Q. So is there a situation -- and this is 11 now hypothetical. 12 Nurse has done some things that 13 Corizon believes is substandard as far as 14 care and treatment, or the prison is 15 concerned. You've tried to take retraining, 16 corrective measures and the nurse continues 17 -- has not reached the standard that Corizon 18 has set for that nurse employee. What, if 19 anything, happens to that particular nurse in 20 that hypothetical? 21 A. They do follow the progressive 22 discipline process. 23 Q. What does that entail? 24 A. So because we are a union environment,</p>	<p>1 we do not -- the CBA, the collective 2 bargaining agreement supersedes anything that 3 we have. Anything that we don't have 4 itemized in the collective bargaining 5 agreement, then we refer back to our employee 6 handbook or to our Corizon policies. 7 Q. Where would the written Corizon 8 disciplinary protocol -- who has that and 9 where is that located? 10 A. That's located in every facility in 11 our policy and procedure manual. 12 Q. Is it a manual? 13 A. Yes. 14 Q. And how are Corizon employees provided 15 with a copy of that particular manual? 16 A. The manual is located in every triage 17 space and every administrator office across 18 the region. So they have the ability to -- 19 because it's so tangible, they can make 20 copies if they like. 21 Overall, we do have discussions on 22 each of our policies and procedures 23 throughout our staff meetings each month. 24 Q. On or about March of 2016, did Corizon</p>

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<p>1 have any written rules, regulations or 2 procedures relating to review of a prison 3 nurse's treatment of a prisoner who may have 4 died in his cell? 5 A. I'm not sure if I understand. 6 Q. Okay. Hypothetical, a nurse goes to a 7 prison cell, attempts to resuscitate a 8 prisoner. Unsuccessful in doing so, the 9 prisoner dies. 10 Are there any written rules and 11 regulations by Corizon as to what the 12 protocol, how to handle that particular 13 situation? 14 A. Post the incident? 15 Q. Yes. 16 MS. CAULEY: Not how to handle 17 the incident itself, but how to 18 handle it after it's occurred? 19 MR. WILSON: Yeah. Yeah. I'm 20 going to get to that later. 21 THE WITNESS: Yes there are. 22 BY MR. WILSON: 23 Q. Can you explain, what's the protocol? 24 A. Yes. First and foremost we are</p>	<p>1 up the encounter for what we could call a 2 walk in. Or depending on the nurse, it may 3 also be called visit type as a stretcher. 4 They will merge in what we call a 5 smart form, which is basically a nursing 6 assessment tool that allows us to document 7 specifically on any given situation. That 8 will lock their notes and assign that 9 information over to the provider for review. 10 Q. The provider? 11 A. To the physician or the midlevel 12 that's on duty or in attendance at the time. 13 Q. So in that situation, the nurse 14 prepares a report, done electronically. That 15 report then goes to the doctor who may have 16 been on duty at that time? 17 A. Yes. 18 Q. Is that what you're talking about? 19 A. Yes. 20 Q. I just want to get clear. 21 A. Um-hum. 22 Q. Okay. So the doctor then has to 23 review that report; is that correct? 24 A. Correct.</p>
Page 51	Page 53
<p>1 expected to offer our staff the employee 2 assistance program. Just to see how they are 3 able to -- how they are coping with the 4 incident at hand. 5 As far as the nursing and physician 6 responsibility, they are expected to 7 immediately post the event to document their 8 findings, document the timeline in realtime 9 so that we can get it into the record, 10 because we do have an eight-hour time period 11 before which we need to close the record so 12 that we can get it off to the warden and/or 13 the designee. 14 In addition to that, we want to make 15 sure that the EMS team is still on campus, 16 have all the required information they need 17 before leaving. 18 Q. When a nurse prepares a report in that 19 situation, physically what happens -- take me 20 step by step, what happens with that record? 21 A. Well, the report itself is documented 22 in our electronic health record. So the 23 nurse or the physician that was attending the 24 incident will go directly to a computer, pull</p>	<p>1 Q. After the doctor reviews that written 2 report prepared by the nurse, what happens to 3 that report next? 4 A. The report stays in the electronic 5 health record. It's locked with the chart 6 itself and pushed off to the warden as per 7 policy. 8 Q. If you know, given your experience, 9 what does the warden do with that report? 10 A. I'm not exactly sure. 11 Q. But the report definitely goes to -- 12 does it go to the warden of that particular 13 prison? 14 A. Correct. 15 Q. Okay. 16 A. Or their designee, whoever they 17 determine to come pick it up. 18 Q. You said pick it up, so there is no -- 19 I'm just -- I'm really just asking for a 20 friend. 21 The warden picks it -- has someone 22 physically pick up the report, or is there a 23 way for the warden or his representative or 24 designee to electronically secure the report?</p>

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<p>1 A. There is a way to have it 2 electronically submitted, we started that 3 process around 2017. In 2016, I do believe 4 it was a paper system. 5 Q. Okay. It was an old way. 6 A. Correct. 7 Q. After the nurse prepares the report, 8 is the nurse debriefed by anyone, a Corizon 9 employee, for example? 10 A. Absolutely. So during the employee 11 assistance program offering, that's when we 12 have the conversation. Just, one, to 13 determine the mindset of the staff who 14 attended the incident. And then, two, to get 15 conversation about what may have or may not 16 have occurred. We call it a debrief. 17 And that's done with the medical team 18 on duty. That's not just with those who 19 attended, but everyone on the faculty at that 20 time. 21 Q. Everyone on the faculty meaning 22 Corizon and non-Corizon employees? 23 A. I'm sorry, Corizon employees. 24 Q. I'm just making sure we get</p>	<p>1 the Centurion team. And the assistant 2 program managers on the Centurion team. So 3 it's all inclusive. 4 Q. When does that meeting usually take 5 place? 6 A. Within 30 days post the incident. 7 Q. Okay. And that's -- is that what you 8 were talking about earlier in our deposition 9 about Lisa Witkowski reduces the contents of 10 the statements made at that meeting to 11 writing, and so forth and so on? 12 A. Lynda Witkowski, yes. 13 Q. I wrote down Lynda, sorry. Lynda 14 Witkowski, that's who you're talking about? 15 A. Yes. 16 My apologies, I'm also missing 17 someone. The contract coordinator is also in 18 attendance. 19 Q. Contract coordinator is a Corizon 20 employee? 21 A. No, she's a city employee. 22 Q. And where do these meetings usually 23 take place, if you know? 24 A. Normally they are done at mod 2, 8000</p>
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<p>1 clarification. 2 Are you familiar with, generally, 3 prison deaths on Philadelphia State Road 4 where there are meetings with all of the 5 parties, any party who may have been in 6 contact with the deceased prisoner, like 7 immediately after the death? Meaning Corizon 8 employees who were there, non-Corizon 9 employees, COs, officials of that nature? 10 A. Yes, that's done at our mortality 11 meeting. 12 Q. The mortality meeting, so that's just 13 a meeting with everyone directly involved? 14 A. That's a meeting with the security 15 team, which are the sergeants who are 16 responsible for death or internal affairs, I 17 believe is what it's called. Our Centurion 18 leadership. The health service 19 administrators. The nurses or staff that 20 attended the incident. The quality 21 improvement coordinators. The region medical 22 director. The director of operations. The 23 regional vice president of clinical 24 operations. The director of psychiatry over</p>	<p>1 State Road in our conference room. 2 Q. Does Corizon have unified rules and 3 regulations for Corizon's prison medical 4 employees at all of the United States 5 facilities, prison facilities, or are there 6 separate and different rules and regulations, 7 for example, for Corizon employees in 8 Philadelphia as opposed to Pittsburgh or Ohio 9 or something like that? 10 A. Our core processes and policies and 11 procedures are templated, so they are 12 general. However, we do have the ability to 13 have our procedural details to be specific to 14 what we do in our facility. 15 So the general compliance indicator is 16 the standard, is consistent across the 17 company, however, how we get to meet that 18 compliance indicator may be different, each 19 facility is different. 20 Q. You talked earlier about the fact that 21 there is obviously a contract that exists 22 between Corizon and the City of Philadelphia, 23 correct? 24 A. Yes.</p>

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<p>1 Q. Who would have, for example, a copy of 2 that contract, the terms of that contract? 3 A. Our Deputy Commissioner of Medical and 4 Behavioral Health Services, Dr. Bruce Herdman 5 would be my understanding. 6 Q. Generally, has Corizon developed rules 7 and regulations and procedures for how to 8 attempt to treat a prison employee who has 9 attempted to commit suicide, and then is 10 unconscious in his cell? 11 MR. MAGUIRE: You mean an 12 inmate? 13 MR. WILSON: Yes. 14 THE WITNESS: That's what I 15 was wondering. 16 MR. MAGUIRE: You said 17 employee. 18 MR. WILSON: I said employee? 19 I'm sorry. 20 MS. CAULEY: Let's start over. 21 BY MR. WILSON: 22 Q. Does Corizon have any written rules 23 and regulations concerning training protocols 24 for Corizon employees and medical staff, for</p>	<p>1 Q. And how is that information shared? 2 A. So via the electronic health record 3 that I mentioned earlier, but also in the 4 mortality meeting. 5 Q. Is that the Torch? 6 A. No, our electronic health record where 7 we do our day-to-day operations of patient 8 care is called ECW, E Clinical Work is that 9 formal name. 10 Q. Other than the electronic work that 11 you talked about, would there -- do you have 12 an independent recollection, for example, of 13 whether or not Corizon employees keep Emails? 14 Do they Email anyone in reference to, say, a 15 prison suicide death? 16 A. Employees? 17 Q. Yeah, do they Email other employees? 18 A. I'd have to defer to them. The 19 expectation would be no. 20 Q. Well, let me try to rephrase this 21 question. 22 Are you aware, in your experience, are 23 you aware of any -- specifically prison 24 suicide deaths, post, after a death has</p>
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<p>1 how they deal with a prisoner who has 2 attempted to commit suicide and is 3 unconscious in his cell? 4 A. So I will go back to the suicide 5 prevention, and overall it's not specific to 6 prisoners, it's in relation to any person we 7 may find inside the walls. 8 So the suicide prevention is exactly 9 the same whether they are a prisoner or an 10 employee, just for the record. 11 Q. What, if any, type of business 12 relationship does Corizon in Philadelphia -- 13 does Corizon have with MHM Services 14 Incorporated? 15 A. The Centurion team, previously MHM, we 16 are complete partners, we do share the entire 17 patient health record. So we have the 18 ability to see all encounters, all visit 19 types, all statuses of the patient 20 holistically. So we share information 21 fluidly. 22 Q. Do you also share information on, if a 23 prisoner has committed suicide in the prison? 24 A. Yes.</p>	<p>1 occurred in the prison. Are there any Emails 2 that you're aware that are kept -- I'm not 3 taking about the electronic things you just 4 testified to. 5 Are there any Emails, are there 6 written correspondence that are transferred 7 other than the ones you talked about? 8 A. Yes. 9 Q. I'm going to try to get you to repeat 10 yourself. 11 A. Yes. 12 Q. What would those be? 13 A. That would be the initial notification 14 of the sentinel event itself. That would 15 come from the health service administrator at 16 the respective facility and that will come 17 directly to me. I will then send that 18 information over to the deputy commissioner 19 warden I spoke of earlier -- I'm sorry, 20 Deputy Commissioner, Dr. Bruce Herman as an 21 alert. 22 Q. And it's just prisoner so and so died 23 on such and such a date? 24 A. There is no real standing template,</p>



<p style="text-align: right;">Page 62</p> <p>1     however it's just information from the 2     patient's intake to a few highpoints of the 3     situation at that moment. 4     Q.   And who would have that Email string? 5     A.   The person who originated it. 6     Q.   Okay. Do you have an independent 7     recollection -- because you sound like, given 8     your testimony, that you were involved. Is 9     it fair to say that for a prison suicide that 10    took place, for example, March 2016, my 11    client Gene Wilson, it sounds like you would 12    be involved in an Email string related to 13    that particular suicide death? 14    A.   Yes. 15    Q.   Did you check your Email records to 16    see if you had any Emails concerning that 17    particular death? 18    A.   I did not. 19    Q.   Okay. If you have them, I'd like you 20    to -- and I'll still send you something. But 21    you're duty bound under the rules of discovery 22    to give that to your counsel, so I can take a 23    look at it, okay. 24    A.   Yes.</p>	<p style="text-align: right;">Page 64</p> <p>1     Corrections, Corizon had one nurse on duty 2     from Friday through I think early Sunday 3     morning. Does Corizon have that as a formal 4     written policy, in writing? 5     MS. CAULEY: Objection to 6     form. I don't know that that's -- 7     I think it's confusing, one nurse 8     on duty from Friday to Sunday. I 9     don't think that's clear. I think 10    they worked in shifts, that's my 11    only objection. 12    BY MR. WILSON: 13    Q.   They worked in shifts, but there was 14    one nurse on duty at all times from Friday -- 15    given the information that we have received, 16    from Friday through say Sunday. Does that 17    particular policy, is that in writing 18    anywhere from Corizon? 19    MS. CAULEY: Just object to 20    the form. You can answer. 21    THE WITNESS: I'm sorry. I'm 22    still trying to interpret what 23    you're asking me. So without 24    trying to dig into it and determine</p>
<p style="text-align: right;">Page 63</p> <p>1           MS. CAULEY: Well, you can 2     issue me a request and we'll 3     respond appropriately. It's not 4     your job to tell her what she's 5     duty bound to do. 6     MR. WILSON: I'm not going to 7     get into an argument on the record 8     I'll move on. 9     MS. CAULEY: Okay. 10    BY MR. WILSON: 11    Q.   As of March 2016, what, if any, 12    written rules and regulations did Corizon 13    have in reference to weekend staffing of 14    medical staff at the prisons during that time 15    period? 16    MS. CAULEY: Objection to 17    form. 18    BY MR. WILSON: 19    Q.   Do you understand the question? 20    A.   I don't think so. 21    Q.   As of March 2016, Corizon had, for 22    example, part time -- excuse me, not part 23    time, I'll rephrase the question. 24        As of March 2016 at the House of</p>	<p style="text-align: right;">Page 65</p> <p>1           what you're attempting to ask... 2    BY MR. WILSON: 3    Q.   Don't worry about it. Don't answer. 4    I'll try to rephrase it. 5    A.   Thank you. 6    Q.   We had received information in 7    discovery that the nurse who attended to my 8    deceased client in prison, had testified that 9    she was the only nurse on duty at the time, 10   because on the weekends, the staff is 11   reduced, nursing staff is reduced to one 12   person, essentially, a night. Until she's 13   relieved, I think she said at 7 a.m. the next 14   day. 15   A.   A night. So we're talking nightshift 16   at HOC or House of Corrections in 2016? 17   Q.   Yes. 18   A.   So I'm not as familiar with the 19   staffing plan. But I will tell you that we 20   are -- when we are doing what we call the 21   request for proposal response back to the 22   client, we do determine staffing patterns at 23   that time. This is four years in the making. 24        So they are required by the Deputy</p>

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<p>1 Commissioner I spoke of earlier, Dr. Bruce 2 Herman, he lets us know what the staffing 3 matrix should be. And we provide staffing 4 based off the request. So whatever the 5 staffing pattern is, it was requested of us. 6 It was at no time the expectation from 7 myself as the Director of Operations for any 8 nurse to attend any emergency by themselves. 9 We have protocols for that. 10 Q. What are the general staffing 11 requirements, via rules and regulations for 12 Corizon as it relates to Corizon employee 13 staffing at the House of Corrections as of 14 March of 2016; if you know? 15 A. I do know. We are required at every 16 facility, not just HOC, to have at least one 17 RN at all times. So I'm not exactly sure 18 what was testified to. But that is 19 absolutely accurate. 20 There could be one RN in the facility, 21 with the exception of Curran-Fromhold at any 22 one time. But there are support nurse staff 23 with them as well, whether it be an LPN or 24 medical assistant or medical records clerk.</p>	<p>1 Maybe I need coffee guys, I'm 2 sorry. 3 MS. CAULEY: Do you want a 4 coffee? 5 THE WITNESS: Would that be 6 okay? 7 MR. WILSON: Absolutely. 8 - - - 9 (Whereupon, a brief recess was 10 taken at 12:40 p.m. and the 11 deposition resumed at 12:45 p.m.) 12 - - - 13 BY MR. WILSON: 14 Q. Okay. When prison deaths occur at a 15 prison, where Corizon has employees, say at 16 Philadelphia on State Road, has Corizon 17 developed a way to somehow monitor or log the 18 prison -- we'll start with prison deaths. 19 A. Yes. 20 Q. And how is that done? 21 A. First it's done via the Email alert to 22 me directly, letting me know of the incident. 23 It's also done from the security end in what 24 they call a flash report. So that goes out</p>
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<p>1 Q. Are what you just testified to, is 2 that reduced to writing? 3 A. Yes. 4 Q. And where would that writing be 5 located on this particular issue? 6 A. It would be a part of the daily 7 schedule that we placed out into the 8 facilities for any one particular day. 9 In addition to that, it would be a 10 part of the staffing patterns that are part 11 of policies and procedures. 12 Q. Where would those staffing patterns 13 and policies and procedures, where would they 14 be located? 15 A. With HOC being closed at this moment, 16 my recollection would be that they would be 17 in our regional medical records office. 18 Q. Does Corizon have a way of monitoring 19 suicide deaths in jails where -- provide 20 staff and employees to attend to the 21 particular prisoners? 22 MS. CAULEY: I don't 23 understand that. 24 THE WITNESS: Thank you.</p>	<p>1 to all the security leadership. 2 Q. Just a second. Security leadership 3 with Corizon or with... 4 A. No, sir. The Philadelphia Department 5 of Prisons leadership. I'm not exactly sure 6 who all that entails. But I do know that 7 there are flash reports that come out. 8 Q. Okay. And the same question as to 9 suicide deaths. 10 A. Same response. 11 Q. All right. So does Corizon collect -- 12 I'm just talking about Corizon. 13 Does Corizon collect this information 14 say for a particular year? Like 15 hypothetically for a particular year we had 16 ten prison suicides -- you're nodding your 17 head. 18 A. I'm sorry, I'm waiting. 19 Q. Is that correct? 20 A. Yes, that is correct. 21 Q. Okay. Where is that information kept? 22 A. In the file I spoke of earlier with 23 our Quality Improvement Coordinator in a 24 sentinel event binder.</p>

<p style="text-align: right;">Page 70</p> <p>1 Q. So I should be able to obtain that 2 information for every year, say for the last, 3 what, ten years? Do you understand the 4 question? 5 A. I do. Depending on the request and 6 the approval from our legal department, you 7 could get any of the information that you're 8 requesting. 9 Q. Does Corizon share its information 10 regarding these issues with the Philadelphia 11 Prison System? 12 A. Yes. 13 Q. Okay. Is there a separate -- to the 14 best of your experience, is there a separate 15 database the Philadelphia Prison System has 16 in reference to, for example, suicide deaths? 17 A. Not that I recall or am aware of. 18 Q. When Corizon -- we have established 19 that Corizon has this information. What, if 20 anything, does Corizon do with this 21 information, for example, specifically for 22 suicide deaths? 23 A. We take the opportunity to review the 24 incident at hand for emergency response on</p>	<p style="text-align: right;">Page 72</p> <p>1 deaths and then review -- I'm not talking 2 about one specific incident, just generally, 3 globally. 4 Do you take that information, does 5 Corizon look at that information for trends 6 or problems generally? 7 A. Yes. 8 Q. If Corizon does that, and you said 9 they do, if they have established that there 10 is some sort of a trend, what, if anything, 11 specifically as it relates to suicide deaths, 12 does Corizon do in that particular situation, 13 hypothetically? 14 A. So we have that conversation with the 15 Centurion team and we do ask that they 16 provide us any specific guidance, training, 17 education or resource information that we may 18 not be able to obtain from our own systems to 19 be able to help guide us to be better, since, 20 you know, the suicide attempt is a behavioral 21 health concern we utilize our partners to be 22 stronger. 23 Q. Has Corizon made that determination 24 regarding suicide deaths in prisons? Have</p>
<p style="text-align: right;">Page 71</p> <p>1 the physical medicine end. We also take the 2 opportunity at the mortality review to go 3 over that information with those who are 4 involved. And we solicit the support of our 5 Centurion team to see if there is anything 6 that, from their perspective, that we could 7 have done or do to support them. 8 Q. Is there a report that's generated for 9 each of those deaths that you -- in reference 10 to say, you said we looked at the things we 11 could do. We confer with Centurion. Are 12 those things that you're talking about, are 13 they reduced to writing? 14 A. Yes. 15 Q. And where would those writings be 16 located? 17 A. In that same sentinel event binder, 18 manual, folder. 19 Q. Okay. You talk about Centurion, just 20 for the record, for clarification, that's MHM 21 Services? 22 A. Previously known as MHM Services. 23 Q. Okay. Does Corizon take that 24 information, for example, regarding suicide</p>	<p style="text-align: right;">Page 73</p> <p>1 they made that determination that there is an 2 issue that they conferred with Corizon in say 3 the last seven years? 4 A. Not to my recollection. 5 Q. If you know, I might have asked you 6 this earlier I apologize ahead of time, if 7 you know -- never mind, you did answer it. 8 I'm going to move on. 9 Other than the discussions you 10 testified to earlier, are there any 11 independent panels that you are aware of, 12 either state or federal, that investigate 13 suicide deaths that take place in 14 Philadelphia? 15 A. From the Corizon side, I know we do 16 have a sentinel event committee from the 17 corporate level that does meet and have 18 discussions about every sentinel event, 19 inclusive of attempted suicides and completed 20 suicides. 21 Q. Right. I think you mentioned that 22 before. But other than Corizon, does Corizon 23 have to confer with either a state, local or 24 federal entity that examines, in conjunction</p>

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<p>1 with Corizon, suicide deaths that take place 2 in prison when they take place? 3 A. I'm not sure of that. 4 Q. You know the acronym BLS? 5 A. Yes. 6 Q. Does Corizon provide a training course 7 for its prison medical staff for BLS? 8 A. We do provide a courtesy course, yes. 9 Q. And how long has Corizon been 10 providing that courtesy course? 11 A. Well, before my tenure in the 12 contract. 13 Q. Is that, again, done on a yearly basis 14 to the best of your recollection? 15 A. No, we hold the courtesy course 16 monthly, every third Monday of the month. 17 Q. Okay. Every third Monday of every 18 month. Is the course mandatory? 19 A. No. 20 Q. So that training for that course would 21 have been in place in March of 2016, correct? 22 A. Yes. 23 Q. On or about March of 2016, here in 24 Philadelphia, did Corizon provide any sort of</p>	<p>1 Q. And so that's independent, meaning 2 that training does not have to take place 3 say, for example, at the HOC, that can be 4 done at other facilities, at other places? 5 A. Correct. 6 Q. It's mandatory that the person provide 7 some sort of certification though? 8 A. Correct. 9 Q. Does Corizon, in the last say ten 10 years, provide, generally, training to its 11 employees, specialized training involving 12 prevention of suicide? 13 A. Yes. 14 Q. Is that subdivided with providing 15 prevention of suicide for prisoners or is 16 that just a general kind of training? 17 A. It's all inclusive. 18 Q. And is that mandatory training? 19 A. Yes. 20 Q. Are the training materials in writing 21 anywhere? 22 A. Yes. 23 Q. Where would those training materials 24 be located?</p>
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<p>1 training program to its employees on how to 2 use an AED, an automated external 3 defibrillator? 4 A. Yes. 5 Q. Is that training mandatory? 6 A. Yes, that's part of the emergency 7 response training I referred to earlier. 8 Q. Okay. And there is certification for 9 the completion of that course as well? 10 A. It's certification as it relates to 11 the BLS or CPR certification specifically. 12 MR. MAGUIRE: What's BLS? 13 MS. CAULEY: Basic life 14 support. 15 THE WITNESS: Yes. 16 BY MR. WILSON: 17 Q. And how specifically is that training 18 for the AED implemented? 19 A. Well, because each person who holds a 20 license and is required to independently 21 obtain the training, there are certified BLS 22 or CPR instructors who do train to that 23 emergency response and the AED usage on both 24 children and adults.</p>	<p>1 A. In our suicide prevention manuals. In 2 our policy and procedure manuals. In our 3 quality improvement manuals. I'm sure they 4 are elsewhere. And obviously online via that 5 Torch, the learning management system I 6 expressed earlier. 7 Q. What about training in suicide 8 recognition, does Corizon train for that as 9 well? 10 A. I would have to have an understanding 11 of what suicide recognition is. I know what 12 suicide ideations are. I'm not exactly sure 13 of suicide recognition. 14 Q. Well recognizing, for example that 15 potential suicide can entail, just as an 16 example, more than just, hey, I want to harm 17 myself or harm others. That it could be that 18 in combination of erratic behavior, 19 nonsensical statements, heightened anxiety, 20 depression and the like. Do you know if the 21 training materials speak to those issues as 22 well? 23 A. Yes, I do. And yes they do. 24 MS. KURTZ: I'm sorry, are you</p>

<p style="text-align: right;">Page 78</p> <p>1 referring to Corizon's training?  2 MR. WILSON: Yes,  3 specifically.  4 THE WITNESS: Yes.  5 MS. KURTZ: Just want to make  6 sure I understood.  7 BY MR. WILSON:  8 Q. Just taking you back to something we  9 touched on earlier. Why did Corizon, during  10 this time period, around March 2016, have  11 policy and practice of only staffing the  12 House of Corrections with one nurse at a time  13 during the weekends?  14 A. I can't confirm that. From what you  15 stated, that was testified by a nurse.  16 Q. Yeah.  17 A. That's not a part of our staffing  18 patterns.  19 Q. And you did mention the staffing  20 patterns, that information is located where  21 again?  22 A. On the staffing -- the daily --  23 Q. The daily schedule?  24 A. Yes, sir.</p>	<p style="text-align: right;">Page 80</p> <p>1 for example, nursing staff at the prisons?  2 A. Yes.  3 Q. And how frequently is that done?  4 A. At minimum, annually.  5 Q. Who is that done by?  6 A. A peer. We call them peer reviews,  7 where we take the opportunity for someone of  8 the like, so an RN will review an RN, and we  9 take the areas that the employee works based  10 off the daily schedule most often, and then  11 we do peer checks to insure that the person  12 is responding or documenting and/or treating  13 prudently.  14 Q. And once the reviews are done, are the  15 findings reduced to writing?  16 A. Yes.  17 Q. Where would those writings be located?  18 A. In the specific employee's training  19 file.  20 Q. Is that like a personnel file?  21 A. A personnel file, yes, sir.  22 Q. In a peer review, hypothetically  23 speaking, if they find that the nurse may  24 have been lacking or may have committed some</p>
<p style="text-align: right;">Page 79</p> <p>1 Q. Okay. Why is it important, if you  2 know, for medical Corizon employees to be  3 staffed as full and a complete of staff as  4 possible in a prison?  5 MS. CAULEY: Objection to  6 form.  7 BY MR. WILSON:  8 Q. Do you understand the question?  9 A. Yes.  10 Q. Okay.  11 A. All right. It's important for  12 support. Just to run the day-to-day  13 operation. In addition to that, for  14 emergency response it would be extremely  15 helpful to have someone to rely on, a  16 counterpart. If for any reason that we did  17 not, considering all staff members clinical  18 and nonclinical, we are responsible for  19 emergency response and CPR. But it's always  20 helpful to have someone with you when you're  21 dealing in any emergency. However, we are  22 trained to do it independently.  23 Q. Does Corizon have a system where they  24 conduct some sort of periodic evaluations of,</p>	<p style="text-align: right;">Page 81</p> <p>1 sort of internal Corizon violation, what, if  2 any, retraining is done for that particular  3 nurse?  4 A. So the administrator of the facility  5 would initiate what we call a PIP, or  6 performance improvement plan, that would  7 allow us to focus on the areas of deficiency.  8 We would itemize what those deficiencies are,  9 put timelines to them.  10 In addition to that, we would then  11 re-audit periodically depending on the level  12 or what the administrative determines makes  13 sense, as far as the auditing piece. And  14 then we would share those findings with the  15 employee to make sure that they are  16 progressing.  17 Q. When you share the findings, is it any  18 attempt to retrain the employee in that  19 particular way that you feel may not have met  20 the standards of Corizon?  21 A. Yes. So the performance improvement  22 plan basically itemized what the plan of  23 action is. And most of the times, if not  24 all, it does include retraining and/or review</p>

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<p>1 or re-acclimation of the competency that are 2 expected as it relates to that deficiency. 3 Q. Is the fact that nurse employees, for 4 example, hypothetically, may have been 5 retrained, is there notation made in the 6 personnel file for that particular employee? 7 A. Yes. 8 Q. Okay. Does Corizon in Philadelphia 9 have any rules and regulations regarding -- 10 written rules and regulations generally 11 regarding working with Centurion or MHM 12 Services? 13 A. Not that I can recall. 14 Q. Other than the Emails that you 15 discussed earlier, are you aware of any other 16 Emails or any other type of correspondence 17 that may exist in reference, specifically to 18 the Gene Wilson March 2016 prison suicide 19 matter? 20 A. No, sir. 21 Q. Okay. You testified earlier about 22 what a Corizon staff, medical staff is 23 supposed to do once a prisoner has died in 24 prison. That procedure that you testified</p>	<p>1 Q. Okay. I'm actually almost done, I 2 just have a few more questions. 3 A. Sure. I can do this all day. 4 Q. Did you bring any documents with you 5 today in reference to this particular 6 lawsuit? 7 A. No, sir. 8 Q. I'm done. 9 MR. MAGUIRE: Nothing from me. 10 MS. KURTZ: No questions. 11 - - - 12 (Witness excused.) 13 - - - 14 (Deposition concluded at 1:10 15 p.m.) 16 - - - 17 18 19 20 21 22 23 24</p>
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<p>1 to, is that procedure written up in writing 2 anywhere for the Corizon employees? 3 A. Yes, as part of the critique for the 4 debrief and the mortality review. 5 Q. But I'm saying the Corizon employee 6 would have access to the general, this is 7 what you do A, B, C and D? 8 A. Yes. 9 Q. And where would those physical rules 10 and regulations be located? 11 A. In the emergency response manuals. 12 Q. Okay. Does Corizon have a formal 13 prison medical employee, general training 14 manual, do you know what I'm saying, that 15 covers all these different issues, or is it 16 just like you described different -- 17 A. If I understand your question 18 correctly, we have many manuals. So a lot of 19 them are duplicative. So you'll see many of 20 the same processes noted in different 21 manuals, whether that be policy and 22 procedure, quality improvement, infection 23 control, emergency response planning, safety. 24 It could be in any one of the many.</p>	<p>1 CERTIFICATE 2 I do hereby certify that I am a Notary 3 Public in good standing, that the aforesaid 4 testimony was taken before me, pursuant to 5 notice, at the time and place indicated; that 6 said deponent was by me duly sworn to tell 7 the truth, the whole truth, and nothing but 8 the truth; that the testimony of said 9 deponent was correctly recorded in machine 10 shorthand by me and thereafter transcribed 11 under my supervision with computer-aided 12 transcription; that the deposition is a true 13 and correct record of the testimony given by 14 the witness; and that I am neither of counsel 15 nor kin to any party in said action, nor 16 interested in the outcome thereof. 17 WITNESS my hand and official seal this 18 20th day of January, 2020. 19 Michelle A. Landman 20 21 Notary Public 22 23 24</p>

A				B			
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